MEMORANDUM

Agenda Item No. 11(A)(39)

TO:

Honorable Chairman Bruno A. Barreiro

and Members, Board of County Commissioners

DATE:

March 6, 2007

FROM:

Murray A. Greenberg

County Attorney

SUBJECT:

Resolution authorizing a cash

allocation and in-kind services

for the Celebrity 5K

sponsored by the Community Partnership for Homeless, Inc.

The accompanying resolution was prepared and placed on the agenda at the request of Commissioner Sally A. Heyman.

Murray A. Greenberg

County Attorney

MAG/jls

TO:

Honorable Chairman Bruno A. Barreiro

No committee review

DATE:

March 6, 2007

and Members, Board of County Commissioners

FROM:

County Attorney

SUBJECT: Agenda Item No. 11(A)(39)

Please note any items checked.
 "4-Day Rule" ("3-Day Rule" for committees) applicable if raised
 6 weeks required between first reading and public hearing
 4 weeks notification to municipal officials required prior to public hearing
 Decreases revenues or increases expenditures without balancing budge
 Budget required
 Statement of fiscal impact required
 Bid waiver requiring County Manager's written recommendation
Ordinance creating a new board requires detailed County Manager's report for public hearing
 Housekeeping item (no policy decision required)

Approved	Mayor	Agenda Item No. 11(A)(39)
Veto		3-6-07
Override		

RESOLUTION NO.

RESOLUTION AUTHORIZING A CASH ALLOCATION AND IN-KIND SERVICES FROM THE MIAMI-DADE TRANSIT DEPARTMENT AND THE MIAMI-DADE FIRE RESCUE DEPARTMENT FOR THE MARCH 25, 2007 CELEBRITY 5K SPONSORED BY THE COMMUNITY PARTNERSHIP FOR HOMELESS, INC., A NOT-FOR-PROFIT ORGANIZATION, IN AN AMOUNT NOT TO EXCEED \$10,693.00 TO BE FUNDED IN PART FROM THE COUNTYWIDE IN-KIND RESERVE FUND AND IN PART FROM THE NON-AD VALOREM PORTION OF THE FIRE RESCUE DISTRICT BUDGET

WHEREAS, the Community Partnership for Homeless, Inc. has requested a \$7,579.00 cash allocation from the Countywide In-kind Reserve Fund and \$3,114.00 in in-kind services from the Miami-Dade Transit Department and the Miami-Dade Fire Rescue Department for the March 25, 2007 Celebrity 5K (see attached Fee Waiver/In-kind Service Application); and

WHEREAS, the Community Partnership for Homeless, Inc. is a not-for-profit organization; and

WHEREAS, the Celebrity 5K is a special event, as that term is defined on the attached Fee Waiver/In-kind Service Application, and \$2,421.00 of the in-kind services shall be funded from the Countywide In-kind Reserve Fund, and \$693.00 of the in-kind services shall be funded from the non-ad valorem portion of the Fire Rescue District Budget,

NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF MIAMI-DADE COUNTY, FLORIDA, that this Board authorizes a cash allocation and in-kind services from the Miami-Dade Transit Department and the Miami-Dade Fire Rescue Department for the March 25, 2007 Celebrity 5K in an amount not to exceed



Agenda Item No. 11(A)(39) Page No. 2

\$10,693.00 to be funded in part from the Countywide In-kind Reserve Fund and in part from the non-ad valorem portion of the Fire Rescue District Budget.

The foregoing resolution was sponsored by Commissioner Sally A. Heyman and offered by Commissioner , who moved its adoption. The motion was seconded by Commissioner and upon being put to a vote, the vote was as

follows:

Bruno A. Barreiro, Chairman Barbara J. Jordan, Vice-Chairwoman

Jose "Pepe" Diaz
Carlos A. Gimenez
Joe A. Martinez
Dorrin D. Rolle
Katy Sorenson

Audrey M. Edmonson
Sally A. Heyman
Dennis C. Moss
Natacha Seijas
Rebeca Sosa

Sen. Javier D. Souto

The Chairperson thereupon declared the resolution duly passed and adopted this 6th day of March, 2007. This resolution shall become effective ten (10) days after the date of its adoption unless vetoed by the Mayor, and if vetoed, shall become effective only upon an override by this Board.

MIAMI-DADE COUNTY, FLORIDA BY ITS BOARD OF COUNTY COMMISSIONERS

HARVEY RUVIN, CLERK

By: Deputy Clerk

Approved by County Attorney as to form and legal sufficiency.

DDC

Monica Rizo



COUNTY FEE WAIVERS OR IN-KIND SERVICES REQUESTED THROUGH THIS PROCESS ARE NOT EFFECTIVE UNTIL APPROVED BY ACTION OF THE BOARD OF COUNTY COMMISSIONERS PURSUANT TO THE MIAMI-DADE COUNTY HOME RULE CHARTER

Please complete the following form and submit completed form along with requested materials, if applicable, to:

Special Events Staff Communications Department 111 N.W. 1st Street, Suite 2510 Phone: (305) 375-2836 Fax: (305) 375-3968

Miami, FL 33128

Туј	e of B	Event/Appli	ication	(select one of th	e followin);			·		
	District Event - Event of minimal impact related to specific commission district (Complete questions 1-7, sign and date; copy will be submitted to the appropriate District Commissioner within two days of receipt of application.)										
	a	Small Eve	ent -								
	×	Special E	vent -	Event with exp							lual community or or to event date.)
	a	Major Eve	ent -	Large Event wi	ith expect	ed attendar	nce of over 5,0	00 of significa	int probability of	f protests, co	ntroversy, violence or or to event date.)
.1.	Fuli	legal name	e of the	requesting orga	anization:	Com	munif.	PART	nership) For	Homeless,
2.	App	licant Statu	ıs: (Sel	ect one of the ch	hoices be	low)					,
•	٠.		Not-Fo For-Pr	r-Profit or Tax ⊟	xempt .		a	Local Gove	mment or Publi	c Entity	•
			County	Sponsored Eve	ent/Spons	oring Depa	rtment				,
3.	Mam			specify): ormation for sing					ddronn oto)-		
J.	\leq	NON	E	Wibing of all) <u> </u>	305	1/1/4 3-29-3 1/1/4	እ81	3 134		
4.	Sner	ify fee wai		n-kind service re	eruastad				~~~ ~		
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5.		<u> </u>	ctio	m z see	<u>⊅ a i</u>	0,000	Fre	Rescue	- (TR 10	(N-4,1-4)	+ Cash
5.	Name	e date of e	ctic	description, and	purpose o	of the event	Twe	und-raiser, de	fine the benefic	plaries):	+ Cash
5.	Name	e, date of e	event, o	description, and	bnubose c	of the event	t (if event is a fi	und-raiser, de	fine the benefic	plaries):	+ Cash
5.	Name	e, date of e	event, o	description, and	bnubose c	of the event	t (if event is a fi	und-raiser, de	fine the benefic	plaries):	+ Cash
5. 6.	Name C	e, date of e	event, o	description, and	bnubose c	of the event	t (if event is a fi	und-raiser, de	fine the benefic	plaries):	+ Cash
	Name C Box	e, date of e	event, of that	description, and in the communication: Eventual Social Servicition for communication: Event Culture: Event	purpose of the Event's to benefits ces; Even ity	of the event	elity or growth of health-related atre, literature.	und-raiser, de	onomy nal benefits r social program	ciaries):	+ Cash
	Name C Pleas	e, date of e	event, one in the conormal con	description, and specific pevelopment ducation; Evening Social Services	purpose of the purpos	of the event	elity or growth of the alth-related atre, literature, or growers or growth of the alth-related atre, literature, or growth of the alth-related atre.	of the local ed	onomy nal benefits r social program	riaries):	+ Cash
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MIAMI-DADE COUNTY FEE WAIVER/IN-KIND SERVICES APPLICATION

8.	Description of regional or local impact: War our a Public Private Toutreship
٠.	that Not ONLY Creates Buchiness, but beach, relises
	MND LENDS SUPPOSE SCRINGES to Get OVER 700
-	people out the tetrels on a nightly basis.
9.	Daily/hourly event schedule, including set-up and breakdown schedule (attach event calendar, if applicable):
<i>3.</i>	4 Am - 12:00 pm
	The state of the s
10.	Detailed description of event venues (map or schematic of event venues, access points, surrounding roadways and traffic flow diagrams, if applicable): ユニル トトへ いんとく
	applicable)
	- () () ()
11,	Expected number of participants and estimated attendance (per day, if applicable): 3000
12.	Itemized budget, including total event budget, total budget of host organization, if applicable, and total commitment of resources (attach
	additional pages as needed): See A Hra Che cl.
1 4 =	reby certify that all the statements made in this application are true and correct.
ne	reby certify that all the statements made in this application are true and someon
_	Math- women
Sign	adure of Authorized Representative
	. 1
ے	46/07
Date	

In-kind Service Request Commissioner Sally Heyman March 25, 2007

6 buses 5 hours plus travel time \$2,127.84

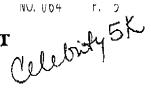
1 mini bus 4 hrs plus travel time \$292.64

Total

\$2,420.48

MIAMI-DADE FIRE RESCUE DEPARTMENT

SPECIAL EVENTS BUREAU



693.00

Total Event Estimate S_

9300 N.W. 41 STREET DORAL, FLORIDA 33178 OFFICE (786) 331-5000 / FAX (786) 331-4435

SPECIA	L EVENTS OVERTIME ES	TIMATE SH	EET		
			January 25, 2007	<u>.</u>	
Invoice Number:		Prepared By:	MICHEL ANTOL	NE	
Control Number:					
	VENDOR INFORMAT	ION			- 7
Name: COMMISSIONER H	IEYMAN SALLY	··			-
Billing Address: [1] NW 15T STREE			Zip Code:_	33128	s
City: MIAMI	State:	Florida			-
	an an disam				
Phone Number: 305-375-5128					
	PERSONNEL				
		O and sides	Event Hours	Tota	1
Rank / Title	Overtime Hourly Rate	Quantity	BVEHI IZOUIS	\$	
Chief Fire Officer	\$ 75.00	1	4	\$	2 60.0 0
Captain	\$ 65.00 \$ 55.00	<u> </u>		\$	-
Ligutenant	\$ 55.00 \$ 50.00	2	4	\$	400,00
Fire Fighter	\$ 55.00			S	
Fire Prevention Inspector	\$ 30.25			S	
Beach Manager	\$ 26.75			<u>s</u>	
Lifeguard 2	\$ 22.75			\$	 -
Lifeguard 1	\$ 30.00			\$	-
Civilian (Overtime Rate Only)	1	ļ.			
DISPATCHER	<u> </u>		Personnel Total	\$	660.00
	EQUIPMENT				•
	Hourly Rate	Quantity	Event Hours	Tota	al
Туре	\$ 100.00			S	
Pumper	\$ 65.00	·		\$	٠
QRV / TRT	\$ 50,00			\$	-
Rescue Truck	\$ 40.00			\$	
Motorcycle Unit	\$ 35.00			\$	-,
Rescue Cart Rigid Hull Inflatable Boat (RHIB)	\$ 35.00			\$	
Personal Watercraft (PWC)	S 35.00			\$	
Bicycle Unit	\$ 35.00			\$	
Estractic Data			Equipment Total	\$	-
Please make checks payable to: Boar	d of County Commissioners		Personnel Tota	1 \$	660.0
E teore mous smoons believes as man		5%	Administrative Fed	2 S	33.0

County Administrative Order 7-33. NOTE: The above costs are only an extimate for your event. Any permit related inspection costs (tents, stages, etc.) and/or other related firewatch and rescue standby related costs will be borne by the vendor. Required permit inspections must be completed before occupying or use. After hours or weekend inspections will be billed at a rate of \$50.00 per hour with a minimum 4-hour charge

Rev. 00/29/06



Please note: The Board of County Commissioners set all rates through

Miami-Dade Fire Rescue Department Headquarters Special Events Bureau Off Regular Duty Services Application

Event Information

TO THE CO	of Request: 1/25/2007	Application:	01-07-064		
76Te	e of Organization: COMN	AISIONER HEYMAN SAL	LY		<u> </u>
			MIAMI	FL	33128
Addı	ress: 111 NW 1TH STRE	<u> </u>	City	State	Zip Code
Phor	ie: (305)375-5128		Fax: ()		
Type	of Event: 5K RUN		Estimated Attenda	nce: <u>5000</u>	· · · · · · · · · · · · · · · · · · ·
	Address: WATSON ISLA				
			Phone: (787) 75	34 <u>5441</u>	
			To: 3/25/2001	7	
	OI DCA VALUE	3/25/2007			
Hou	rs of Operation: From:	7	To:11		
Add	ress:				
City Tele	ephone: ()		Zip Code: Fax:()	
-		·	Fax: _()	
-		Type of Service	Fax: _()	

See Reverse Side For Additional Important Information

Authority: - Section 1-16 of the Florida Fire Prevention Code empowers the local jurisdiction to establish and issue permits, certificates, notices and approvals, or orders pertaining to fire control and for hazardous conditions. Requirements of permitting shall be established by the Fire Chief or his designee. Whenever, in the opinion of the designated fire official, rescue or firewatch may, be essential for the public safety in any place of assembly or due to the nature of the event, exhibition, display, contest or activity, the owner, agent or leasee shall employ one or more State Certified Firefighter, Fire Inspector, Paramedic or EMT's, as determined by section 2-56.2 of the Dade County Code. The cost of said personnel, equipment and administrative fees will be in accordance with Miami-Dade County Fire Resone Department Administrative order 7-33, Special Events Off-Duty Fire Rescue Services. Vendors engaged in activities or functions for which such services are required and would be seen as necessary, shall comply with all rules, ordinances and laws.

Departmental Policy: - The Fire Rescue Department requires that all first time users of off regular duty services obtain an application until credit approval has been established. This application must be accompanied by FULL PAYMENT FOR THE ESTIMATED TOTAL COST. ALL COMPENSATION DUE FOR SERVICES REQUEST WILL BE PREPAID BY MONEY ORRDER, CERTIFIED CHECK, TRAVELERS CHECK OR CASHIER'S CHECKS AT THE TIME OF APPLICATION OR AS DETERMIND BY THE CHIEF FIRE OFFICIAL RESPONSIBLE FOR OFF REGULAR DUTY SERVICES. ANY COMPENSATION OVER AND ABOVE THE RATE ESTABLISHED IS STRICTLY PROHIBITED. ALL FUNDS PREPAID AND NOT OBLIGATED WILL BE REFUNDED TO THE APPLICANT.

The estimated cost of the requested service is:	\$ 693.00
Rescue Personnel. To avoid a minimum fee for be notified at least 24 hours in advance of any charge for processing has been included in the to	nent of duties to be performed and has no authority over Fire Off Regular Duty Services, the Fire Rescue Department must hanges or termination of required services. An administrative otal cost. If an event lasts longer than the prescribed period of ional costs. If a vendor fails to pay total cost or part there of, tive fee may be added.
I HAVE READ AND UNDERSTOOD THE PROV COMPLIANCE	visions of theis application and will act in full be of this agreement.
	January 25, 2007
Authorized Agency Representative	Date
Ci-	January 25, 2007
Signature of the Firewatch Clerk	Date
For further Information and assistance, please contact th Address 9300 NW 41 ² Street, Miami, Fl 33178	ie Special Events Bureau of (786) 331-5000 or Fax (786) 331-4435.
(For Fire	Department Use Only)
Final Cost: S	
Signature:	
Chief Manny Mena or Designee Fire Prevention Division	Date

Special Events Bureau

Celebrity 5K Vendor Budget

Advertisment: Publications Printing Website Graphic Design Road Banners	2,500.00 4,000.00 - - 6,268.00	12,768.00	in-kind - Amarilis in-kind - BBK Mekka
Participant Amenities: T-shirts Caps	12,000.00 6,000.00	*	I revised this to be at \$4 per shirt
Food	3,000.00	*	
Race numbers	1,200.00	*	
ice	250.00	*	
Medals	9,000.00	*	
Trophies	350.00	*	
		31,800.00	
Production Expenses:			
Traffic Control/Barricades	3,450.00		
Police	3,500.00		
EMS	250.00		
Sanction	425.00		no charge unless the course is changed
Certification			standard signage - special requests not
Signage	3,000.00		(includes the stage and the risers)
Equipment rental	1,000.00 850.00		(volunteer group donations for groups)
Community groups	1,000.00		(includes the stage banner and the infla
Sponsor related purchases	400.00		(
Tables & chair Rental	550.00		
permit Port-o-lets	1,700.00	*	
Buses	5,000.00		
Parking lot rental	1,250.00		
Balloons & decorations	600.00		
Timing & scoring	8,750.00	*	
Band	700.00		
		32,425.00	
Total expenses		76,993.00	

^{*} Based on 3,000 partticipants



- Register to run and get:
- Performance T-Shirt with Romero Britto's Design' Performance Running Cap

- Backpack, Keychain and Spinning Medal
 Free Training Sessions by Equinox Fitness Clubs

Invitation to:

After Race Party with awards ceremony, gourmet food, massage, and a live concert by Pop singer Ana Cristina

Get a chance to run with celebrities including: Emilio Estefan, Belkys Nerey, Romero Britto, Jon Secada, Lili Estefan, Sammy Sosa, Alfonso Soriano, Gary Hall, Rony Seikaly, and more!

SUNDAY, MARCH 25, 2007 8:00AM REGISTER ONLINE AT WWW.CELEBRITY5K.COM



















Date:

March 6, 2007

To:

Honorable Chairman Bruno A. Barreiro

and Members, Board of County Commissioners

From:

County Manager

Subject:

Countywide In-Kind Reserve Request Recommendation

Recommendation

The Office of Strategic Business Management (OSBM) has reviewed the attached in-kind request and recommends for the item to move forward to the Board of County Commissioners for consideration.

Background

A waiver for in-kind services is being requested by a not-for-profit organization Community Partnership For Homeless, Inc. for their Celebrity 5K event to be held on March 25, 2007.

In-kind services have been requested in an amount not to exceed \$2,421 from the Miami-Dade Transit Department (MDT) for shuttle bus services, \$693 from the Miami-Dade Fire Rescue Department (MDFR) for EMS services and a cash allocation not to exceed \$7,579 to the Community Partnership for Homeless, Inc. for a total in-kind amount of \$10,693. The in-kind services provided by MDFR do not affect the countywide in-kind reserve fund. The remaining in-kind services and cash allocation in the amount of \$10,000 will be funded form the countywide in-kind reserve fund.

As part of the FY 2006-07 Adopted Budget, Community Partnership for Homeless, Inc. received \$35,000 through the Public Health Trust community-based organization funding.

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